

PATENT

Atty. Dkt. No. ROC820010279US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 06 2004

In re Application of:

French et al.

Group Art Unit: 2172

Serial No.: 10/028,842

Confirmation No.: 3305

Filed: December 20, 2001

For: Method and Apparatus for an
Interactive Interface

Examiner: Woo, I.

OFFICIAL

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450CERTIFICATE OF FAX
37 CFR 1.8I hereby certify that this correspondence is being facsimile
transmitted to the Patent and Trademark Office to fax number
703/872-8306 to the attention of Examiner Isaac Woo on the
date below:06 Aug 2004
Date

Randol W. Read

Dear Sir:

RESPONSE TO OFFICE ACTION DATED MAY 6, 2004

In response to the Office Action dated May 6, 2004, having a shortened statutory period for response set to expire on August 6, 2004, please enter this response and reconsider the claims pending in the application for reasons discussed below. The Commissioner is hereby authorized to charge counsel's Deposit Account No. 09-0465, the fee of \$36.00 for the addition of two (2) dependent claims and for any fees, including extension of time fees or excess claim fees, required to make this response timely and acceptable to the Office.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper. Remarks/Arguments begin on page 7 of this paper.

11/22/2004 BHILLIAR 00000001 090465 10028842

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/028842
Rec 72001027905-1

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	<i>32</i>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>32</i> minus 20 = *	<i>12</i>
INDEPENDENT CLAIMS	<i>3</i> minus 3 = *	<i>0</i>
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X\$ 9=		OR	X\$18=	<i>216</i>
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	<i>956</i>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

8-604

	(Column 1)		(Column 2)		(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	* <i>34</i>	Minus	** <i>32</i>	= <i>2</i>
	Independent	* <i>3</i>	Minus	*** <i>3</i>	= <i>0</i>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	<i>\$36</i>
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	<i>36</i>

	(Column 1)		(Column 2)		(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)		(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.